B1 (Official I	Form 1)(1/0	08)											
			United Sout			ruptcy f New Y					Volu	ıntary	Petition
Name of Debtor (if individual, enter Last, First, Middle): 830 E. 163 St. Corp.							Name	of Joint De	ebtor (Spouse	e) (Last, First	, Middle):		
All Other Na (include mar				8 years					used by the . maiden, and			years	
Last four dig (if more than o	one, state all)	Sec. or Indi	ividual-Taxpa	ayer I.D. (ITIN) No./	Complete E		our digits o e than one, s		r Individual-	Гахрауег I.D). (ITIN) No	o./Complete EIN
Street Addre 10 Fiske Suite 31	Place	r (No. and	Street, City, a	and State)	:		Street	Address of	f Joint Debtor	r (No. and St	reet, City, an	d State):	
	ernon, N	Y			_	ZIP Code	:						ZIP Code
County of Ro	esidence or	of the Prin	cipal Place o	f Business		10550	Count	y of Reside	ence or of the	Principal Pl	ace of Busin	ess:	
Westche										1.			
Mailing Add	ress of Deb	tor (if diffe	rent from str	eet addres	ss):		Mailir	g Address	of Joint Debt	tor (if differe	nt from stree	t address):	
						ZIP Code	:						ZIP Code
Location of 1	Duin aim al. A.	seets of Due	inasa Dahtar	. 8 ⁴	30 F 163	rd Street	,						
Location of I (if different f						10459-2							
	• •	Debtor				of Business one box)	i			r of Bankruj Petition is Fi			:h
☐ Corporat ☐ Partnersh ☐ Other (If	al (includes bit D on parion (include hip debtor is not	ge 2 of this es LLC and one of the a	form. LLP) bove entities,	Sing in 1	1 U.S.C. § road ekbroker nmodity Br uring Bank	eal Estate as 101 (51B)	s defined	☐ Chapt☐	ter 9 ter 11 ter 12	of C of Nature	hapter 15 Pe a Foreign M hapter 15 Pe a Foreign N e of Debts	Iain Procee tition for R	eding ecognition
cneck this	box and stat	e type or end	ty below.)	unde	(Check box tor is a tax- er Title 26 o	mpt Entity and the implicable exempt orgoid the Unite that Revenue	e) anization d States	defined "incurr	are primarily cod in 11 U.S.C. ared by an indivioual, family, or	onsumer debts § 101(8) as idual primarily	for		are primarily ess debts.
E II E'II'	Б "	_	ee (Check or	ne box)			l l	one box:	a small busin	Chapter 11		1111268	101(51D)
 Full Filing Fee attached ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. 						tor Check	Debtor is if: Debtor's ato insiders all applica A plan is Acceptance	not a small b aggregate not s or affiliates)	ncontingent I) are less that with this petition were solicity	or as defined iquidated de n \$2,190,000 on.	bts (excludion).	C. § 101(51D). ing debts owed e or more	
Debtor es	stimates tha	t funds will t, after any	ation I be available exempt prope for distribut	erty is ex	cluded and	administrat		es paid,		THIS	S SPACE IS FO	OR COURT	USE ONLY
Estimated No	umber of Ci	reditors 100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated As		\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million		\$500,000,001 to \$1 billion	More than				
Estimated Li \$0 to \$50,000	abilities \$50,001 to \$100,000	\$100,001 to \$500,000	to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition 830 E. 163 St. Corp. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) ☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(1/08)

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 \mathbf{X}

Signature of Debtor

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Joel M. Shafferman

Signature of Attorney for Debtor(s)

Joel M. Shafferman JMS-1055

Printed Name of Attorney for Debtor(s)

Shafferman & Feldman, LLP

Firm Name

350 Fifth Avenue Suite 2723 New York, NY 10118-1913

Address

Email: joel@shafeldlaw.com

212 509-1802 Fax: 212 509-1831

Telephone Number

March 3, 2010

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Charles Plummer

Signature of Authorized Individual

Charles Plummer

Printed Name of Authorized Individual

President

Title of Authorized Individual

March 3, 2010

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

830 E. 163 St. Corp.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

•	~		
	_		

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B4 (Official Form 4) (12/07)

United States Bankruptcy Court Southern District of New York

In re	830 E. 163 St. Corp.		Case No.	
		Debtor(s)	Chapter	11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Hess Corporation 1 Hess Plaza Woodbridge, NJ 07095	Hess Corporation 1 Hess Plaza Woodbridge, NJ 07095	Vendor		5,833.46
JP Morgan Chase Bank, N.A. Jaspan Schlesinger, LLP 300 Garden City Plaza Garden City, NY 11530	JP Morgan Chase Bank, N.A. Jaspan Schlesinger, LLP 300 Garden City Plaza Garden City, NY 11530			2,201,311.17 (0.00 secured)
NYC DEP 1932 Arthur Avenue Room 601 Bronx, NY 10457-6306 NYC Department of Finance Field Collection 59 Maiden Lane	NYC DEP 1932 Arthur Avenue Room 601 Bronx, NY 10457-6306 NYC Department of Finance Field Collection 59 Maiden Lane	8/10/07-3/03/09	Disputed	Unknown (0.00 secured) 11,550.00 (0.00 secured)
New York, NY 10038 NYS Workers' Compensation Board Finance Office, Room 301 20 Park Street Albany, NY 12241-0005	New York, NY 10038 NYS Workers' Compensation Board Finance Office, Room 301 20 Park Street Albany, NY 12241-0005		Disputed	164,500.00

B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	830 E. 163 St. Corp.	Case No.	
	Debtor(s)	•	

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date	March 3, 2010	Signature	/s/ Charles Plummer
			Charles Plummer
			President

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In re	830 E. 163 St. Corp.	Case No.
		· · · · · · · · · · · · · · · · · · ·

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxxxx1261 JP Morgan Chase Bank, N.A.	CODEBTOR	Hu H W J C	Sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN First Mortgage	CONT I NGENT	UNLIQUIDATED		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Jaspan Schlesinger, LLP 300 Garden City Plaza Garden City, NY 11530		-	Value \$ 0.00	_			2,201,311.17	2,201,311.17
Account No. xxxxxxxxx0001			Statutory Lien	П		\Box	_,,,	_,,_,
NYC DEP 1932 Arthur Avenue Room 601 Bronx, NY 10457-6306		_	8/10/07-3/03/09 Value \$ 0.00	-		x	Halmania	Halin avan
Account No. xxxxxxxxx0 ECB			Value \$ 0.00 11/24/09	Н		\vdash	Unknown	Unknown
NYC Department of Finance Field Collection 59 Maiden Lane New York, NY 10038		_	Statutory Lien Value \$ 0.00	-			11,550.00	11,550.00
Account No.			Value \$				11,000.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
continuation sheets attached			S (Total of t	Subto his p			2,212,861.17	2,212,861.17
			(Report on Summary of Sc		ota ule		2,212,861.17	2,212,861.17

In re	830 E. 163 St. Corp.	Case No.	
-		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecure	ed c	laın	ns to report on this Schedule F.					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H V C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONT - NGENT	OZ LLQULDAF HD	D I SPUTED		AMOUNT OF CLAIM
Account No. xx8099			Vendor	Ť	E			
Hess Corporation 1 Hess Plaza Woodbridge, NJ 07095		_						5,833.46
Account No.				\prod		Г	1	
NYS Workers' Compensation Board Finance Office, Room 301 20 Park Street Albany, NY 12241-0005		-)	x	404 500 00
Account No.				\dashv		H	+	164,500.00
Account No.								
continuation sheets attached			S (Total of t	Subt his p)	170,333.46
			(Report on Summary of Sc		ota lule		, [170,333.46

United States Bankruptcy Court Southern District of New York

In re	830 E. 163 St. Corp.			Case No.	
			Debtor(s)	Chapter	11
				1	
	DECLARATION CO	NCERN	ING DEBTOR'S SC	HEDULI	ES
	DECLARATION UNDER PENALTY OF F	PERJURY	ON BEHALF OF CORPO	RATION C	OR PARTNERSHIP
	I, the President of the corporation narread the foregoing summary and schedules, corof my knowledge, information, and belief.				
Date	March 3, 2010	Signature	/s/ Charles Plummer Charles Plummer President		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

GOLD & ROSENBLATT, ESQS. 840 GRAND CONCOURSE BRONX, NY 10451

HESS CORPORATION 1 HESS PLAZA WOODBRIDGE, NJ 07095

JP MORGAN CHASE BANK, N.A. JASPAN SCHLESINGER, LLP 300 GARDEN CITY PLAZA GARDEN CITY, NY 11530

NYC DEP 1932 ARTHUR AVENUE ROOM 601 BRONX, NY 10457-6306

NYC DEPARTMENT OF FINANCE FIELD COLLECTION 59 MAIDEN LANE NEW YORK, NY 10038

NYS DEPT OF LABOR BUILDING 12 ROOM 256 ALBANY, NY 12240

NYS WORKERS' COMPENSATION BOARD FINANCE OFFICE, ROOM 301 20 PARK STREET ALBANY, NY 12241-0005

WALTER RIVERA, ESQ. RIVERA & COLON, LLP 61 BROADWAY, SUITE 1030 NEW YORK, NY 10006

WORKERS COMPENSATION BOARD OF NYS OFFICE OF SECRETARY 20 PARK STREET ALBANY, NY 12207 WORKERS COMPENSATION BOARD OF NYS OFFICE OF SECRETARY 111 LIVINGSTON STREET, 22ND FLOOR BROOKLYN, NY 11201